3. Plasma Fractions of India, Bom-b ty..,

4. Haffkine Bio-Pharmaceutical Cor-relation, Bombay.

5. Bharat Serum & Vaccina Pvt. Ltd., Bombay.

6. M/s. Chemech Laboratories Ltd., Madias.

7 Immune Kimia, Bombay.

(g) and (h) Detailed instructions have heen issued on the 14-2-1989 by the Directorate General of Health Services to all State Drug Controllers for screening all blood and blood products. These instructions cover the following aspects:—

1. Manufacturers of blood products are Tequired to test samples of blood from every bleeding, for HIV anti-bodies. Only those blood units which are free from HIV antibodies should be used for manufacture of blood products.

2. The pool of plasma before fractionation is required to be tested for HIV anti-bodies,

3. Standard manufacturing processes have been suggested for manufacture of blood products.

4. As a measure of abundant caution, blood products containing immunoglobulin preparations are required to be screened for HIV antibodies and released for marketing only if they are found free from HIV antibodies.

5. State Drug Control Authority should undertake random checking of immunog-lobulin preparations by getting th$_e$ samples tested at accredited laboratories.

(i) and (j) Import of Anti-D immu-noglobulin is permitted under th$_e$ import Policy. However, there is no regular import of this product^ There was no import of Anti-D immunoglobulin during 1986.87 and 1987-88. However, dur ing the period from Apri to De cember 1988, a quantity of 500x10 ml. was imported.

Import of Drugs

805. DR. BAPU KALDATE; Will the Minister of HEALTH AND FAMILY WELFARE be pleased to stale:

(a) whether Thiabendazole, Ox-etha-zine, Bacitracin Zinc, Cephalexin, Framy-cetine and Cephalordine is allowed foi import

(b) if so, the quantity of each drug imported during last two years, year-wise;

(c) the names of each importer, quanti ty imported by each during each year, source of import alongwith average CIF price per year of each drug;

(d) what are the diseases for which each drug i$_s$ used and whether any of these drugs have $_a$ny side effects; and

(e) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) to (c) "

import of Oxethazine, acin Zinc, Cephalexin, Framycetin and Cephaforidine fo it two years n in Statement. *(See* below).

(d) and (e) As per Statement-II. *(See* below)

Statement-I

Name of the Drug	1986-87		1987-88	
	Quantity	CIF Value in Rs.	Quantity	CIF Value in Rs.
1. Thiabendazole . . .	1200 kgs.	3,54,300	4500 kgs.	13,43,611
2. Oxethazine . . .	1842 ,,	51,53,751	2235 ,,	58,51,631
3. Bacitracin Zinc . . .	72,649 MU	43,51,165	66890 MU 5 Kg.	53,34,250 8,398
4. Cephalexin . . .	35864·05 Kgs.	8,71,47,547	17,335 kg.	435,32,608
5. Framycetin . . .	175 Kg.	7,85,180	170 kg.	7,26,357
6. Cephaloridin . . .	650.71 Kg.	50,83,690	716.86 Kg.	54,08,607

Statement-II

Name of the Drugs	Disease for which used	Side effects
1. Thiabendazone . . .	Treatment of Threadworm Roundworm.	Skin Rashes, Nausea, Vomiting, Diarrhoea, Headache.
2. Oxethazine . . .	It is used in Conjunction with antacid for the Symptomatic relief of oesophagitis.	Hypersensitive reaction.
3. Bacitracin Zinc . . .	Used as an external application the skin or the eye in the treatment of infection due to susceptible organism.	Sweet-allergic disorders.
4. Cephalexin . . .	Treatment of Infections of the respiratory and urinary tract.	Nausea, Vomiting, Diarrhoe, Abdominal Discomfort, skin rashes.
5. Framycetin . . .	Treatment of infection of the skin, eye or ear.	Hypersensitive and reactions occur.
6. Cephaloridin . . .	Treatment of infections of the respiratory and urinary tract, Maningitis, Bronchitis, Syphilis.	Skin rashes, urticaria etc.

Marketing of Finished Medicines

806. SHIRI M. KADHARSHA: Will (inister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the marketing permission of finished medicines is given subject to certain conditions;

(b) whether it is a fact that one of the conditions is to get the table anj pack insert approved by the Drti£p Directorate of Government before marketing;

(e) if so, the names of brands of formulations fo[- which pack insert was approved during the last two years, yearwise along with the names of drug companies; ,

(d) whether it is also a fact that pack insert is not being provided with nnashed) medicines; and

(e) if so, the reasons thereof and what steps have been taken in this regard?

THE MINISTER OF STATE IN THB MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) and (b) Yes, Sir.

(c) Package insert of drugs approved by the Government during the last two